

FCC/MELLON

MAY 13 1992

R&E

ROBERTS & ECKARD, PROFESSIONAL CORPORATION

1919 PENNSYLVANIA AVENUE, N.W., SUITE 222, WASHINGTON, D.C. 20006
TELEPHONE (202) 296-0533 TELECOPIER (202) 296-0464

RETURN COPY

May 13, 1992

RECEIVED

MAY 15 1992

BY HAND

Federal Communications Commission
Office of the Secretary

Ms. Donna R. Searcy, Secretary
Federal Communications Commission
Mass Media Services
P.O. Box 358170
Pittsburgh, PA 15251-5170

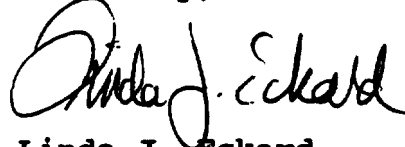
Re: Milford Broadcasting Company
Milford, Iowa
File No. BPH-911003MI

Dear Ms. Searcy:

Enclosed for filing are FCC Form 155 and a check for \$6,750 submitted on behalf of the above-referenced applicant for a new FM station to serve Milford, Iowa. This letter, fee form and check are being filed pursuant to a Notice of Acceptance, Report No. NA-157, released March 12, 1992.

If there are any questions, please contact the undersigned counsel.

Sincerely,



Linda J. Eckard

LJE:pd
Enclosures

FEDERAL COMMUNICATIONS COMMISSION
FEE PROCESSING FORM

FOR
FCC
USE
ONLY

Please read instructions on back of this form before completing it. Section I MUST be completed. If you are applying for concurrent actions which require you to list more than one Fee Type Code, you must also complete Section II. This form must accompany all payments. Only one Fee Processing Form may be submitted per application or filing. Please type or print legibly. All required blocks must be completed or application/filing will be returned without action.

SECTION I

APPLICANT NAME (Last, first, middle initial)

MITFORD BROADCASTING COMPANY

MAILING ADDRESS (Line 1) (Maximum 35 characters - refer to Instruction (2) on reverse of form)

c/o Roberts & Eckard, P.C.

MAILING ADDRESS (Line 2) (If required) (Maximum 35 characters)

1919 Pennsylvania Avenue, N.W. -- Suite 222

CITY

Washington

Federal Communications Commission
Office of the Secretary

STATE OR COUNTRY (If foreign address)

DC

ZIP CODE

20006

CALL SIGN

OTHER FCC IDENTIFIER

911003 MI

Enter in Column (A) the correct Fee Type Code for the service you are applying for. Fee Type Codes may be found in FCC Fee Filing Guides. Enter in Column (B) the Fee Multiple, if applicable. Enter in Column (C) the result obtained from multiplying the value of the Fee Type Code in Column (A) by the number entered in Column (B), if any.

(A)

FEE TYPE CODE

(1)

MWR

(B)

FEE MULTIPLE
(If required)

(C)

FEE DUE FOR FEE TYPE
CODE IN COLUMN (A)

\$ 6,760.00

FOR FCC USE ONLY

SECTION II

— To be used only when you are requesting concurrent actions which result in a requirement to list more than one Fee Type Code.

(A)

FEE TYPE CODE

(B)

FEE MULTIPLE
(If required)

(C)

FEE DUE FOR FEE TYPE
CODE IN COLUMN (A)

FOR FCC USE ONLY

(2)

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\$	
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(3)

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(4)

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(5)

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\$	
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ADD ALL AMOUNTS SHOWN IN COLUMN C, LINES (1) THROUGH (5), AND ENTER THE TOTAL HERE. THIS AMOUNT SHOULD EQUAL YOUR ENCLOSED REMITTANCE.

TOTAL AMOUNT REMITTED
WITH THIS APPLICATION
OR FILING

\$ 6,760.00

FOR FCC USE ONLY